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**TELECOPY/FACSIMILE****To:**

U.S. Patent and Trademark Office  
Art Unit 2617

**Fax Number:**

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**Tel Number:**

From: Lawrence J. McClure

Date: June 28, 2006

Time:

Total number of pages incl. cover page: 16

**For internal purposes only:**

Client number: 81887.0126

Attorney billing number: 1966

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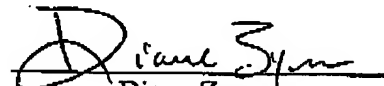
**Patent Application No.: 10/538,262; Art Unit 2617, Our Ref. 81887.0126**

I hereby certify that the following documents:

☒ Second Preliminary Amendment/Amendment Transmittal Letter

are being facsimiled to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, for filing in the above-identified application.

June 28, 2006  
Date of Deposit

  
Diane Zynn

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WLA - 81887/0126 - 266801 v1

FORM PTO-1083

81887.0126  
Patent Application No. 10/538,262

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Hiroyuki HIDAHA

Serial No: 10/538,262

Filed: June 8, 2005

For: COMMUNICATION SYSTEM, WIRELESS  
COMMUNICATION TERMINAL, AND  
WIRELESS BASE STATION

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JUN 28 2006

Art Unit: 2617  
Examiner: Not Assigned

I hereby certify that this correspondence  
is being transmitted via facsimile to  
(571)273-8300:  
Mail Stop Preliminary Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450 on

June 28, 2006

Date of Deposit

Diane Zynn

Name

Signature

06/28/06

Date

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is a Second Preliminary Amendment in the above-identified application.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE	ADD'L FEE DUE
TOTAL CLAIMS FEE	22	-	20	2	LG=\$50 SM=\$25	\$ 100
INDEPENDENT CLAIMS FEE	7	-	5	2	LG=\$200 SM=\$100	\$ 400
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$360 SMALL ENTITY FEE = \$180	\$ 0
Independent Claims: 1, 2, 6, 7, 11, 12, 13					TOTAL	\$ 500

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☒ Please charge the fee of **\$500** for the additional claim fees to Deposit Account No. 50-1314. A copy of this sheet is enclosed.
- ☐ Please charge the fee of \$\_\_\_ for the \_\_\_\_\_ extension of time to Deposit Account No. 50-1314. A copy of this sheet is enclosed.
- ☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. A copy of this sheet is enclosed.
- ☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
- ☒ Any patent application processing fees under 37 C.F.R. § 1.17

07/06/2006 GFREY1 00000119 501314 10538262

01 FC:1615 100.00 DA  
02 FC:1614 400.00 DA

Date: June 28, 2006

Biltmore Tower  
500 South Grand Avenue, Suite 1900  
Los Angeles, California 90071  
Telephone: 213 337-6700  
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Respectfully submitted,  
HOGAN & HARTSON L.L.P.

By:

Lawrence J. McClure  
Registration No. 44,228  
Attorney for Applicant(s)

FORM PTO-1083

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